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# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of

Edward J.Grenchus, Jr. et al. Applicant

Serial No. : 09/923,470 Filed 6 Aug 2001

Examiner Johnna R. Loftis

PATENT ATTORNEY

Art Unit 3623

Entitled System and Method for Forecasting :

Demanufacturing Requirements

Docket No. END920010061US1 :

Commissioner For Patents P. O. Box 1450 Alexandria, VA 22313-1450

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 09/923,470 Filing Date TRANSMITTAL 8/6/01 First Named Inventor FORM Edward J. Grenchus, Jr. Art Unit 3623 **Examiner Name** Johnna R. Loftis (to be used for all correspondence after initial filing) Attorney Docket Number END920010061US1 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC X Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences ppeal Communication to TC Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Identify Terminal Disclaimer Extension of Time Request Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Shelley M Beckstrand, Esq. PC Signature Delley m Sechstran Printed name Shellev M Beckstrand Date Reg. No. 24 Jul 2006 24, 886 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature Date

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Shelley M Beckstrand

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Fees pursuant to the Consolidated Appropriations Act. 2006 (H.R. 4818).	Application Number	09/923,470		
FEE TRANSMITTAL	Filing Date	6 Aug 2001		
For FY 2006	First Named Inventor	Edward J. Grenchus, Jr.		
	Examiner Name	Johnna R. Loftis		
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	3623		

Applicant claims small entity status. See 37 CFR 1.27							
				Art Unit 3623		:= :	
TOTAL AMOUNT OF PA	PARENT (\$)	) 0		Attorney Docke	t No. EN	D920010061L	JS1
METHOD OF PAYMEN	IT (check al	that apply)					
Check Credit Card Money Order None Other (please identify):							
Deposit Account	Deposit Account Deposit Account Number: 09-0457 Deposit Account Name: IBM Corporation						
For the above-Iden	tified deposit	account, the Direc	ctor is he	reby authorized to	: (check all t	hat apply)	
Charge fee(s	a) indicated be	wole		Charg	ge fee(s) indi	cated below, ex	cept for the filing fee
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17.  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION (	All the fees	below are due	upon fi	ling or may be	subject to	a surcharge	.)
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES							
Application Type	Fee (\$)	mall Entity Fee (\$)	Fee (\$	Small Entity  Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pald (\$)
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	<del></del>
Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25							<u>Small Entity</u> <u>Fee (\$)</u> 25 100
Exch like particular over 5 (monature versions)						180	
Multiple dependent claims 360 180  Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent							•
- 20 or HP =		_ x	_ •			<u>Fee (\$)</u>	Fee Pald (\$)
HP = highest number of tota indep. Claims	ai claims paid to Extra Clain			Paid (\$)			0
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HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer in the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer in the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer in the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer in the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer in the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer in the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer in the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer in the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer in the specific excluding electronically filed sequence or computer in the specific excluding electronically filed sequence or computer in the specific excluding electronically filed sequence or computer in the specific excluding electronically filed excluding electronically filed electronica							
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets   Extra Sheets   Number of each additional 50 or fraction thereof   Fee (\$)   Fee Paid (\$)    -100 =   /50 =   (round up to a whole number)   x   0							
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$) 0	
Other (e.g., late filing surcharge):						0	

SUBMITTED BY			
Signature	Relley of Backstrand	Registration No. (Attorney/Agent) 24,886	Telephone <sub>276</sub> 238-1972
Name (Print/Type)	Shelley M/Bed/strand		Date

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System and Method for Forecasting

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Docket No.

END920010061US1

## AMENDMENT AFTER FINAL

Honorable Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Responsive to the Office Action, designated FINAL, mailed 25 May 2006, please amend the above-identified application as follows: